PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

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Application Number **Application Number** 10/680,374 Filing Date **TRANSMITTAL** October 7, 2003 First Named Inventor **FORM** Johan RADE Art Unit 2635 J. Patel (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission 3 588722000400

ENCLOSURES (Check all that apply)							
x Fee Transmittal Form		Drawing(s)	After Allowance Communication to TC				
Fee Attached		Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment/Reply		Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final		Petition to Convert to a Provisional Application	Proprietary Information				
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter				
X Extension of Time Request		Terminal Disclaimer	X Other Enclosure(s) (please Identify below):				
Express Abandonment Request		Request for Refund	Return Receipt Postcard				
Information Disclosure Statement		CD, Number of CD(s)					
Certified Copy of Priority Document(s)		Landscape Table on CD					
	issing Parts/ Application	Remarks					
Reply to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	MORRISON & FOERSTER LLP						
Signature	Signature Debruh 1 Dlade						
Printed name	Deborah S. Gladstei	in					
Date	May 29, 2007	Reg. No.	43,636				

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE cond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CF	Docket Number (Optional)						
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (	588722000400						
Application Number 10/680,374	Filed C	October 7, 2003					
For METHOD AND SYSTEM FOR GRAPHICS COMPI	RESSION AN	D DISPLAY					
Art Unit 2635		Examiner	J. Patel				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
·	•						
	<del>-</del> ee \$120	Small Entity Fee \$60	\$				
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$				
Three months (37 CFR 1.17(a)(3))	1020	\$510	\$ 510.00				
Four months (37 CFR 1.17(a)(4))	1590	\$795	\$				
Five months (37 CFR 1.17(a)(5))	2160	\$1080	\$				
X Applicant claims small entity status. See 37 CFR 1 A check in the amount of the fee is enclosed.	.27.						
Payment by credit card. Form PTO-2038 is attached	ed.						
The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number  03-1952    Have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in-duplicate.							
I am the applicant/inventor.		055.0.74					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
attorney or agent of record. Registration Number43,636							
attorney or agent under 37 CFR 1.3  Registration number if acting under 3			·				
selval 1 Gade	May 29, 2007						
Signature			Date				
Deborah S. Gladstein Typed or printed name			760-7753 one Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of forms are submitted.							

05/31/2007 AUCHDAF1 00000038 031952 10680374 01 FC:2253 510.00 DA

PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effect	Complete if Known								
Fees pursuant to the Consolid	Application Number 10/680,374								
FEE TR	Filing Date October 7, 200			ევ					
For	First Named Inventor Johan RADE								
	Examiner Name	е	J. Patel						
X Applicant claims sma	Art Unit	Art Unit 2635							
TOTAL AMOUNT OF PA	YMENT	(\$) 510.00	Attorney Docke	t No.	58872200040	0			
METHOD OF PAYME	NT (check all t	hat apply)							
Check Credit Card Money Order None Other (please identify):									
X Deposit Account De	x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP								
For the above-ide	ntified deposit	account, the Director i	s hereby authoriz	ed to: (ch	eck all that apply)	)			
x Charge fee(s	s) indicated be	low	Char	ge fee(s)	indicated below, e	xcept for the	filing fee		
	additional fee(s	s) or underpayments of	of x Credi	t any ove	rpayments				
FEE CALCULATION	7 07 07 17 17 17 17 17 17 17 17 17 17 17 17 17	and the			-				
1. BASIC FILING, SEARC	CH, AND EXAM	INATION FEES				•			
	FILIN		ARCH FEES	EXAM	IINATION FEES	;			
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$)	Small Entity \$) Fee (\$)	: Fee (\$	Small Entity Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150 500		200		i ees ra	iid (\$)		
Design	200	100 100		130					
Plant	200	100 300		160					
Reissue	300	150 500		600					
Provisional	200	100 0		0					
2. EXCESS CLAIM FEES			v	Ŭ	v	s	mall Entity		
Fee Description						Fee (\$)	Fee (\$)		
Each claim over 20 (inclu	Each claim over 20 (including Reissues) 50 25								
	Each independent claim over 3 (including Reissues) 200 100								
Multiple dependent claim	.s					360	180		
Total Claims Extra	a Claims F	Fee (\$) Fee	Paid (\$)		Multiple Depend	ent Claims			
HP = highest number of total c	XX	reater than 20			Fee (\$)	Fee Paid (\$)			
			Paid (\$)	_			_		
- =	x -	=							
HP = highest number of indepe	endent claims paid	for, if greater than 3.							
3. APPLICATION SIZE FE	E <b>E</b>								
If the specification and o									
listings under 37 CFF sheets or fraction the					entity) for each a	idditional 50			
	Extra Sheets				eof Fee (\$)	Foo D	aid (\$)		
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S)  Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
	Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00								
SUBMITTED BY									
Signature // A	0.4	1 512 411	Registration No.	12.62	6 Tolophone	(702) 760	7752		

SUBMITTED BY	A		0	11/	1			
Signature	Meloral	13	las	46	Registration No. (Attorney/Agent)	43,636	Telephone	(703) 760-7753
Name (Print/Type)	Deborah S. Glad	dstein					Date	May 29, 2007